20,000

JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT 3958 COVER SHEET PG 1 ACCOUNT# 2 Total pages filed: The JC/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 35 TITLE CANDIDATE / FIRST OFFICE USE ONLY **OFFICEHOLDER** NAME Date Received Judge Wilfred R. Aguilar NICKNAME SUFFIX 畫 ADDRESS / PO BOX CANDIDATE / APT / SUITE # CITY: STATE: ZIP CODE **OFFICEHOLDER ADDRESS** 3609 Brownwood Dr., Austin, Texas 78759 Change of Address Receipt # rm CAMPAIGN FIRST мі TREASURER HD / PM NAME James N. Rader NICKNAME LAST SUFFIX Date Processed Date Imaged STREET ADDRESS (NO PO BOX PLEASE). APT / SUITE #: CAMPAIGN STATE: ZIP CODE TREASURER **ADDRESS** 503 Brookhaven Trail, Austin, Texas 78746 (Residence or business) AREA CODE PHONE NUMBER EXTENSION **CAMPAIGN** TREASURER PHONE (512) 328-8544 8 REPORT TYPE 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final report (Attach JC/OH - FR) PERIOD THROUGH COVERED / 10 / 98 **ELECTION DATE** ELECTION TYPE 10 ELECTION Month X Primary Runoff General Special 10 / 98 OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Judge, County Court at Law No. 5 Same 13 DIRECT Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. CAMPAIGN Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. EXPENDITURE BY OTHER Name INDIVIDUALS N/A Address / PO Box Act / Suite #. Zio Code additional pages **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM JC/OH COVER SHEET PG 2

| C/OH NAME Jud | lge Wilfre | d R. Aguilar | ACCOUNT # (Etnics Commission filers) |
|---|--------------------|---|---|
| SUPPORTING POLITICAL COMMITTEE(S) | may have been made | des political expenditures by political committees to support the candi- e without the candidate's or officeholder's knowledge or consent. Candi- n only if they receive notice of such expenditures. | date / officeholder. These expenditures dates and officeholders are required to |
| | COMMITTEE TYPE | N/A | |
| | GENERAL | COMMITTEE ADDRESS | |
| | SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | |
| additional pages | | COMMITTEE CAMPAIGN TREASURER ADDRESS | <u> </u> |
| CONTRIBUTION TOTALS | 1. TOTAL PLEDG | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE | \$65.00 |
| | 2. TOTA (OTHE | L POLITICAL CONTRIBUTIONS R THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$13,315.00 |
| EXPENDITURE TOTALS | 3. TOTAL | POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEM | \$12.39 |
| | 4. TOTA | L POLITICAL EXPENDITURES | \$37,075.90 |
| CONTRIBUTION BALANCE | | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST HE REPORTING PERIOD | \$4,196.99 |
| OUTSTANDING | 6. TOTA | L PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF DAY OF THE REPORTING PERIOD | THE \$ Ø |



AFFIX NOTARY STAMP / SEAL ABOVE

is true and correct and includes all information required to be reported by me under Title 18, Election Code.

hature of Candidate of Officeholder

Swom to and subscribed before me, by the said Wilfred R. Aquilar 3rd day of February __ this the __

___, to certify which, witness my hand and seal of office.

Print name of officer administering oath

Title of officer administering oath

Signature of officer administering oath

| | L CONTRIBUTIONS IAN PLEDGES OR LOANS (JUDI | CIAL) | | SCHEDULE A (J) |
|--------------------------------|---|--------------------------------------|-----------------------------------|---|
| The Instruction | Guide explains how to complete this form. | | 1 Total pages Scheo | dule A(J):20 |
| 2 FILER NAME: | Wilfred Aguilar | | 3 ACCOUNT # (Eth | hics Commission filers) |
| 4 Date | 5 Full name of contributor P. David Wahlberg Contributor address: City; State; Zip Code 1208 West Ave., Austin, Texas 78701 | rg ss: City; State; Zip Code | | 8 In-kind contribution description (if applicable) |
| 9 Contributor's pr Attorney | incipal occupation | 10 Contributor's job til Attorney | tle | |
| 11 Contributor's e Self | 11 Contributor's employer/law firm 12 Law firm of contrib | | outor's spouse (if any) | |
| 13 If contributor is | a child, law firm of parent(s) (if any) | | | |
| Date 2/11/98 | Full name of contributor Contributor address: City; State; Zip Code P.O. Box 978, Denton, Texas 76202 | | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| Contributor's prin | ocipal occupation: | Contributor's job title Attorney | : | • |
| Contributor's emp | oloyer/law firm: | Law firm of contribute | or's spouse (if any): | |
| If contributor is a | child, law firm of parent(s) (if any): | | | |
| Date 2/13/98 | Full name of contributor Carlos Eduardo Cardenas Contributor address: City; State; Zip Code 1104 Nueces, Austin, Texas 78701 | out of state PAC | Amount of contribution (\$) \$250 | In-kind contribution description (if applicable) |
| Contributor's pri | ncipal occupation: | Contributor's job title Attorney | · | |
| Contributor's emp | | Law firm of contribute | or's spouse (if any): | |
| I if contributor is s | child law firm of parent(s) (if any): | | | |

Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

· 小说: (20)

| | • | | | |
|---|--|--------------------------------------|-----------------------------------|--|
| Date 2/24/98 | Contributor address: City: State: Zin Code | | Amount of contribution (\$) \$500 | In-kind contribution description (if applicable) |
| Contributor's principal occupation: Attorney Contributor's job title: Attorney | | | | |
| Contributor's emp | | Law firm of contributo | r's spouse (if any): | |
| If contributor is a | child, law firm of parent(s) (if any): | | • | |
| | | | | |
| Date 2/24/98 | Full name of contributor □ out of state PAC Betty Blackwell Contributor address: City; State; Zip Code 812 San Antonio, #415, Austin, Texas 78701 | | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| Contributor's prin | ncipal occupation: | Contributor's job title: Attorney | 3 : | |
| Contributor's emp Self | loyer/law firm: | Law firm of contributo | or's spouse (if any): | |
| If contributor is a | child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| 2/23/98 | David A. Sheppard | | contribution (\$) | description (if applicable) |
| | Contributor address: City, State; Zip Code 700 Lavaca, #1550, Austin, Texas 78701 | | \$500 | |
| Contributor's principal occupation: Attorney | | Contributor's job title: Attorney | | |
| Contributor's emp Self | oloyer/law firm: | Law firm of contributo | or's spouse (if any): | |

| Date | } | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
|-----------------------------|--|-------------------------------------|-----------------------------|--|--|
| 2/26/98 | Michael B. Walker | | CONTRIDUCTION (\$) | 1 description (ii applicable) | |
| | Contributor address: City; State; Zip Code | | \$100 | 1 | |
| | 1621 W. 6th St., Austin, Texas 78767 | | | 1 | |
| Contributor's pr | incipal occupation: | Contributor's job title | : | | |
| Attorney | | Attorney | | | |
| Contributor's em | ployer/law firm: | Law firm of contribute | or's spouse (if any): | | |
| If contributor is | a child, law firm of parent(s) (if any): | | · | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| | Joe F. Taylor | | contribution (\$) | description (if applicable) | |
| 2/24/98 | Contributor address: City, State; Zip Code | | | ! | |
| | | | \$250 | <u> </u> | |
| ' | P.O. Box 1521, Austin, Texas 78767 | | | 1 1 | |
| Contributor's p Attorney | rincipal occupation: | Contributor's job title Attorney | le: | | |
| Contributor's en | nployer/law firm: | Law firm of contribute | ibutor's spouse (if any): | | |
| If contributor is | a child, law firm of parent(s) (if any): | | <u> </u> | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/26/98 | Ian Inglis | | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | | \$250 | | |
| | 13 Scott Cresent, Austin, Texas 78703 | | | Ī | |
| | | | <u> </u> | <u> </u> | |
| Contributor's p Attorney | rincipal occupation: | Contributor's job title Attorney | : | | |
| Contributor's en | nployer/law firm: | Law firm of contribut | or's spouse (if any): | | |

Austin, Texas 78711-2070

A Section Control

(512)463-5800 1-800-325-8506

| - 101-11-11-11-11-11-11-11-11-11-11-11-11- | | | | |
|--|---|----------------------------------|-----------------------------|--|
| Date 2/25/98 | Full name of contributor Kevin Thomas O'Hanlen Contributor address: City; State; Zip Code 808 West Ave., Austin, Texas 78701 | out of state PAC | Amount of contribution (\$) | In-kind contribution I description (if applicable) |
| Contributor's principal occupation: Attorney Contributor's job title Attorney | | Contributor's job title Attorney | | |
| Contributor's emp | loyer/law firm: | Law firm of contributo | or's spouse (if any); | · |
| If contributor is a | child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | I In-kind contribution |
| 2/25/98 | 2/25/98 Robert J. Kuhn Contributor address: City; State; Zip Code | | contribution (\$) | description (if applicable) |
| | | | \$500 | 1 |
| | 603 W. Eighth St., Austin, Texas 78701 | | 3500 | 1 |
| | , | | | İ |
| Contributor's prin | ncipal occupation: | Contributor's job title Attorney | | |
| Contributor's emp Kuhn, Doyle | loyer/lew firm: & Kubn, P.C. | Law firm of contribute | or's spouse (if any): | |
| If contributor is a | child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| 2/26/98 | Bill Whitehurst | | contribution (\$) | description (if applicable) |
| | Contributor address: City; State; Zip Code | | \$500 | |
| | P.O. Box 1802, Austin, Texas 78767 | • | | į |
| | | | <u> </u> | · · · · · · · · · · · · · · · · · · · |
| Contributor's pri Attorney | ncipal occupation: | Contributor's job title Attorney | : | |
| Contributor's emp Whitehurst, | loyer/law firm: Harkness, Ozmun & Archuleta | Law firm of contribute | or's spouse (if any): | , |

 $(x_{i_1}, x_{i_2}, \dots, x_{i_r}, x_{i_r})$

The state of the state of

| Date 2/25/98 Contributor's pri | Full name of contributor Brian Bishop Contributor address: City, State; Zip Code 6103 Northern Dancer Dr., Austin, Texas 78746 | out of state PAC | Amount of contribution (\$) | In-kind contribution I description (if applicable) | |
|--|--|--------------------------------------|-----------------------------|--|--|
| Attorney | | Attorney | | | |
| Contributor's emp Gray & Becl | | Law firm of contributo | r's spouse (if any): | | |
| If contributor is a child, law firm of parent(s) (if any): | | | | | |
| | | | | | |
| Date 3/1/98 | Full name of contributor | | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | | | \$100 | | |
| Contributor's pri Attorney | ncipal occupation: | Contributor's job title: Attorney | e: | | |
| Contributor's emp | oloyer/law firm: | Law firm of contribute | utor's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | · | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/17/98 | George V. Guerry, Jr. | | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | | \$100 | 1 | |
| ! | 1108 Nueces St., Austin, Texas 78701 | | | | |
| Contributor's pri Attorney | ncipal occupation: | Contributor's job title: Attorney | | | |
| Contributor's emp | oloyer/law firm: | Law firm of contribute | or's spouse (if any): | | |

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

| | | | , | | |
|--|---|--|-----------------------------|--|--|
| Date | Full name of contributor | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 2/17/98 | Contributor address: City; State; Zip Code | | | 1 | |
| | | | \$250 | | |
| | 2414 Exposition Blvd., Suite D-210, Austin, Texas | 78703 | | 1 | |
| · · · · | | Contributor's job title: Attorney | | | |
| Contributor's emp | doyer/law firm: ger & Bassett, LLP | Law firm of contributo | or's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | • | | |
| | | | | | |
| Date | Full name of contributor | | Amount of | In-kind contribution | |
| 2/11/98 | | | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | | \$150 | | |
| | 809 Nueces, Austin, Texas 78701 | | 9130 | i | |
| | | | | I | |
| Contributor's pri | ncipal occupation: | Contributor's job title Attorney | ile: | | |
| Contributor's emp | oloyer/law firm: | Law firm of contributor's spouse (if any): | | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/12/98 | Richard J. Segura, Jr. | | contribution (\$) | description (if applicable) | |
| 2,22,70 | Contributor address: City; State; Zip Code | | \$200 | | |
| 1 | 812 San Antonio, Suite G13, Austin, Texas 78701 | | 1 | İ | |
| | | | | 1 | |
| Contributor's principal occupation: Attorney | | Contributor's job title Attorney |) | | |
| Contributor's em | ployer/law firm: | Law firm of contribut | or's spouse (if any): | | |

Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

| Date | | | | | |
|----------------------|---|--|--------------------------|-----------------------------|--|
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/12/98 | Joseph A. Turner | ********* | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | | \$200 | 1 | |
| | 1504 West Ave., Austin, Texas 78701 | | | 1 | |
| O and other day of a | | | | | |
| Attorney | ncipal occupation: | Contributor's job title: Attorney | | | |
| Contributor's emp | loyer/law firm: | Law firm of contributo | r's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | | | |
| Date | Full name of contributor | | Amount of | In-kind contribution | |
| 2/12/98 | David B. Frank | | contribution (\$) | description (if applicable) | |
| -, 1-, 20 | Contributor address: City; State; Zip Code | | \$50 | | |
| | 316 W. 12th St., Suite 214, Austin, Texas 78701 | | 330 | [| |
| | | | | 1 | |
| Contributor's prin | ncipal occupation: | Contributor's job title: Attorney | 9 : | | |
| Contributor's emp | loyer/law firm: | Law firm of contributo | outor's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/17/98 | Raul Reza Vasquez | | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | ••••• | \$150 | 1 | |
| | 1301 Northridge Dr., Austin, Texas 78723 | | | Ì | |
| | <u> </u> | <u>,</u> | | l | |
| Contributor's prid | ncipal occupation: | Contributor's job title: Attorney | | | |
| Contributor's emp | oloyer/law firm: | Law firm of contributor's spouse (if any): | | | |

Austin, Texas 78711-2070

(512)463-5800

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| | | | | · · · · · · · · · · · · · · · · · · · | |
|--|---|--|-----------------------------------|--|--|
| Date 2/18/98 | Full name of contributor | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 2/18/98 | Contributes address Contributes Tip Contributes | | | 1 | |
| | Contributor address: City, State; Zip Code | | \$250 | Ţ | |
| | 1917 W. St. Johns Ave., Austin, Texas 78757 | | | 1 | |
| | | | | Ļ | |
| Contributor's principal occupation: Attorney | | Contributor's job title Attorney | Contributor's job title: Attorney | | |
| Contributor's emp | loyer/law firm: | Law firm of contribut | or's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | 1 | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| | | | contribution (\$) | description (if applicable) | |
| 2/18/98 | Steve Turro | | COMMODIUM (4) | | |
| | Contributor address: City; State; Zip Code | | \$150 | İ | |
| | 404 W. 13th St., Austin, Texas 78701 | | | i | |
| | j | | | · | |
| Contributor's pri Attorney | ncipal occupation: | Contributor's job title Attorney | • | | |
| Contributor's emp | loyer/law firm: | Law firm of contributor's spouse (if any): | | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| | | | contribution (\$) | description (if applicable) | |
| 2/18/98 | Jody W. Sims | ••••• | (4) | | |
| | Contributor address: City, State; Zip Code | | \$300 | - | |
| | 10617 N. Platt River Dr., Austin, Texas 78748 | | | | |
| | . , | | | i | |
| Contributor's principal occupation: Attorney | | Contributor's job title Attorney | : | | |
| Contributor's emp | oloyer/law firm: | Law firm of contribut | or's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |

CONTRACTOR

1. 1. Fr

| Date | Full name of contributor | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
|---|---|--------------------------------------|-----------------------------|--|--|
| 2/16/98 | Contributor address: City, State; Zip Code 1211 E. 11th St., Austin, Texas 78702 | | \$150 | | |
| Contributor's pa | rincipal occupation: | Contributor's job title Principal | 3: | | |
| Contributor's employer/law firm: Varner & Associates, Inc. | | Law firm of contribut | or's spouse (if any): | | |
| If contributor is | a child, law firm of parent(s) (if any): | | | | |
| | | | | | |
| Date | Full haine or contributor | | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 2/18/98 | | | \$150 | | |
| | 10050 Great Hills Trail, #826, Austin, Texas 787 | 59 | | | |
| Contributor's p | rincipal occupation: | Contributor's job title Attorney | e: | · · · · · · · · · · · · · · · · · · · | |
| Contributor's en | nployer/law firm: | Law firm of contribut | or's spouse (if any): | | |
| If contributor is | a child, law firm of parent(s) (if any): | * | | | |
| | | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/19/98 | John F. Campbell | | contribution (\$) | description (if applicable) | |
| _, _,,,, | Contributor address: City; State; Zip Code | | \$250 | 1 | |
| | 805 W. 10th St., Suite 400, Austin, Texas 78767 | | \$230 | i | |
| | | | | l | |
| Contributor's p | vincipal occupation: | Contributor's job titl Attorney | e: | | |
| Contributor's en | nployer/law firm: | Law firm of contribu | itor's spouse (if any): | M. C. | |

| | _ | | | |
|--------------------------|---|------------------------------------|-----------------------------|--|
| Date | Full name of contributor | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 2/17/98 | Contributor address: City; State; Zip Code | ••••• | | 1 |
| | | | \$100 | |
| | 1304 Nueces, Austin, Texas 78701 | | | 1 |
| Contributor's p | rincipal occupation: | Contributor's job titl Attorney | e: | |
| Contributor's em | ployer/law firm: | Law firm of contribu | tor's spouse (if any): | |
| If contributor is | a child, law firm of parent(s) (if any): | | • | * * * |
| | | | ,a | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| | Nick Duncan | | contribution (\$) | description (if applicable) |
| 2/16/98 | Contributor address: City, State; Zip Code | | | <u> </u> |
| | | | \$150 | |
| | 2135 Barton Hills, Austin, Texas 78704 | | | 1 |
| Contributor's p | rincipal occupation: | Contributor's job titl Attorney | le: | |
| Contributor's en | nployer/law firm: | Law firm of contribu | tor's spouse (if any): | |
| If contributor is | a child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| 2/20/98 | The Dunham Law Firm P.C. | | contribution (\$) | description (if applicable) |
| -/ | Contributor address: City; State; Zip Code | ••••• | \$250 | i |
| | 400 W. 15th St., Suite 1410 Austin, Texas 78701 | | \$230 | i |
| | | | | ĺ |
| Contributor's p | principal occupation: | Contributor's job til Attorney | de: | |
| Contributor's er Self | nployer/law firm: | Law firm of contribu | utor's spouse (if any): | |

Austin, Texas 78711-2070

(512)463-5800 1-800-325-8506

| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
|----------------------------------|--|--|---|-----------------------------|--|
| 2/17/98 | Art Walker | | contribution (\$) | description (if applicable) | |
| | Contributor address: City, State; Zip Code | | \$250 | † | |
| | 1609 Shoal Creek Blvd., Suite 300, Austin, Texas | 1609 Shoal Creek Rivd., Suite 300, Austin, Texas 78701 | | | |
| | , | | | i | |
| | | Contributor's job title Attorney | : | | |
| Contributor's emp Walker, Bri | oloyer/law firm: gut & Whittenton, P.C. | Law firm of contribute | or's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | • | | |
| | | | ı | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| A/15/00 | Robert P. Swafford | | contribution (\$) | description (if applicable) | |
| 2/17/98 | Contributor address: City; State; Zip Code | | | 1 | |
| | | | \$50 | 1 | |
| | 1513 W. 16th St., Suite B, Austin, Texas 78703 | | | | |
| Contributor's pri | ncipal occupation: | Contributor's job title Attorney | ile: | | |
| Contributor's emp | oloyer/law firm: | Law firm of contribut | firm of contributor's spouse (if any): | | |
| If contributor is a | child, law firm of parent(s) (if any): | | | | |
| | | | ANY NO. 8, 21 ANY NO. MAY NORMAN AND AND ANY NORMAN AND AND ANY NORMAN AND AND AND AND AND AND AND AND AND A | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution | |
| 2/19/98 | Roland Daniel Green, III | | contribution (\$) | description (if applicable) | |
| | Contributor address: City; State; Zip Code | | \$100 | İ | |
| | 7114 Meadowood Dr., Austin, Texas 78723 | | | i | |
| | | | : | 1 | |
| Contributor's pr Attorney | incipal occupation: | Contributor's job title Attorney |); | | |
| Contributor's emp | ployer/law firm: | Law firm of contribut | or's spouse (if any): | | |
| If contributor is a | a child, law firm of parent(s) (if any): | | | | |

| · | | | | |
|------------------------------|---|--------------------------------------|-----------------------------|--|
| Date | 1 | out of state PAC | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 2/23/98 | Alberto Garcia Contributor address: City, State; Zip Code | ********** | (0) | ! |
| | 1715 S. First St., Austin, Texas 78704 | | \$300 | 1 |
| | : | | | i |
| Contributor's pr Attorney | Incipal occupation: | Contributor's job title: Attorney | ; | |
| Contributor's em Self | ployer/law firm: | Law firm of contributo | or's spouse (if any): | |
| If contributor is | a child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| 2/20/98 | Jon T. Evans | | contribution (\$) | description (if applicable) |
| | Contributor address: City; State; Zip Code | | \$100 | 1 |
| | 2806 Allison Dr., Austin, Texas 78741 | | | 1 |
| Contributor's pe Attorney | incipal occupation: | Contributor's job title Attorney | | |
| Contributor's em | ployer/law firm: | Law firm of contribute | or's spouse (if any): | |
| If contributor is | a child, law firm of parent(s) (if any): | | | |
| | | | | |
| Date | Full name of contributor | out of state PAC | Amount of | In-kind contribution |
| 2/20/98 | Cherie Ballard | | contribution (\$) | description (if applicable) |
| | Contributor address: City, State; Zip Code | | \$75 | |
| | 381 Brooks Hollow, Austin, Texas 78734 | | | |
| | <u> </u> | | | |
| Contributor's p Attorney | rincipal occupation: | Contributor's job title Attorney | ĸ | |
| Contributor's en | nployer/law firm: | Law firm of contribut | or's spouse (if any): | |

If contributor is a child, law firm of parent(s) (if any):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

| DOL 17 | mission P.O. Box 12070 Austin, Texas 78711-2070 | (512) 463-5800 1-800-325-850 |
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| POLIT | ICAL NDITURES | SCHEDULE F |
| | NDITORES | - |
| The Instruc | пон Guine explains how to complete this form. | 1 Total pages Schedule F: |
| FILER NAME Wilfred R. Aguilar | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date | 5 Payee name See Attached Schedules | 7 Amount (\$) |
| | 6 Payee address; City; State; Zip Code | |
| | | |

| The Instruct | пон Guine explains how to complete this form. | | 1 Total pages Schedu | ile F: |
|--------------|---|--|---------------------------------------|---------------------------|
| FILER NA | ME Wilfred R. Aguilar | | 3 ACCOUNT # (Ethic | s Commission filers) |
| 4 Date | 5 Payee name See Attached Sche 6 Payee address; City: State: 2 | | 7 | Amount (\$) |
| 8 Purpose of | expenditure | 9 Complete if direct Candidate / Officeno | expenditure to benefit C/OH | Office sought / held |
| Date | Payee name Payee address: City: State: 2 | Zip Code | | Amount (\$) |
| Purpose of | expenditure | ·· Complete if direct Candidate / Officend | expenditure to benefit C/Ohlder name | Office sought / held |
| Date | Payee name Payee address; City; State; 2 | Zip Code | | Amount (\$) |
| Purpose of | expenditure | Complete if direct Candidate / Officence | expenditure to benefit C/O/older name | 1 Office sought / held |
| Date | Payee name Payee address; City; State; 2 | Zip Code | | Amount (\$) |
| Purpose of | expenditure | Complete if direct Candidate / Officence | expenditure to benefit C/Oh | Office sought / held |
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| POLITICAL | EXPENDITURES | | SCHEDULE F |
|---------------------------------------|---|--|--|
| The Instruction | Guide explains how to complete this form. | | 1 Total pages Schedule F:3 |
| 2 FILER NAME: | Wilfred Aguilar | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date | 5 Payee name | | 7 Amount (\$) |
| 2/11/98 | Furrows | | \$211.29 |
| 2/11/90 | 6 Payee address: City; State; Zip Code | | |
| | 8319 N. Lamar, Austin, Texas 78753 | | |
| 8 Purpose of Expe Sign Supplies | nditure: | 9 **Complete if direct of Candidate / Office | expenditure to benefit C/OH ** holder name Office sought / held |
| Date | Payee name | | Amount (\$) |
| 2/14/98 | Furrows Payee address: City, State; Zip Code 8319 N. Lamar, Austin, Texas 78753 | | \$200.37 |
| Purpose of Expenditure: Sign Supplies | | **Complete if direct e Candidate / Office | xpenditure to benefit C/OH ** holder name Office sought / held |
| Date | Payee name | | Amount (\$) |
| 2/11/98 | Home Depot | ! | |
| | Payee address: City; State; Zip Code | ********* | \$192.79 |
| | 10107 Research Blvd., Austin, Texas 78759 | | |
| Purpose of Exper Sign Supplies | nditure: | **Complete if direct e Candidate / Office | expenditure to benefit C/OH ** sholder name Office sought / held |
| | | | |
| Date | Payee name | | Amount (\$) |
| 2/17/98 | Austin Womens Political Caucus — PAC | | \$575.00 |
| | Payee address: City; State; Zip Code Austin, Texas 78701 | | |
| Purpose of Expe Mailer | nditure: | **Complete if direct e Candidate / Office | expenditure to benefit C/OH ** cholder name Office sought / held |

POLITICAL EXPENDITURES SCHEDULE F Date Payee name Amount (\$) 2/18/98 Charles Popper \$70.00 Payee address: City; State; Zip Code 611 W. 14th St., Austin, Texas 78701 Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** Reimbursement for stakes Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) 2/18/98 Travis County Democratic Party \$250.00 Payee address: City, State; Zip Code 1905 N. Lamar., Austin, Texas 78705 Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** Advertisement Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) 2/23/98 Austin Tejano Democrats \$400.00 Pavee address: City; State; Zip Code P.O. Box 684734, Austin, Texas 78768 Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** Mailer Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) 2/23/98 Adam Stoffa \$105.61 Pavee address: City; State; Zip Code Austin, Texas 78701 Purpose of Expenditure:

Reimbursement for stakes

Office sought / held

**Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

POLITICAL EXPENDITURES SCHEDULE F Date Payee name Amount (\$) 2/24/98 Dean Rindy Media \$25,000.00 Payee address: City; State; Zip Code 501 N. I-35, Austin, Texas 78705 Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** **Television commercials** Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) 3/1/98 Dean Rindy Media \$10,000.00 Payee address: City; State; Zip Code 501 N. I-35, Austin, Texas 78705 Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** **Television commercials** Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) Payee address: City; State; Zip Code Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought / held Date Payee name Amount (\$) Payee address: City; State; Zip Code Purpose of Expenditure: **Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought / held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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| TILER N | and the same of th | 3 ACCOUNT # (Ethica | Commission filers) |
| Date | 5 Payee name N/A 6 Payee address; City; State; Zip Code | | Amount (\$) |
| Date | 7 Purpose of expenditure Payee name | | |
| | Payee address; City; State; Zip Code | | Amount (\$) |
| | Purpose of expenditure | | |
| Date | Payee name Payee address: City: State; Zip Code Purpose of expenditure | | Amount (\$) |
| Date | Payee name Payee address; City; State; Zip Code | | Amount (\$) |
| | Purpose of expenditure | | |
| Date | Payee name Payee address; City; State; Zip Code | | Amount (\$) |
| | Purpose of expenditure | | • |

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| CREDIT | ission P.O. Box 12070 Austin, Texas 78711-2070 | (512)463-5800 1-800-325-8 SCHEDULE K |
| The Iнзтистон | N Guide explains how to complete this form. | 1 Total pages Schedule K: |
| FILER NAME | E Wilfred R. Aguilar | 3 ACCOUNT # (Ethics Commission filers) |
| Date | 5 Payor name N/A 6 Payor address; City; State; Zip Code | 8 Amount (\$) |
| | 7 Reason for credit | |
| Date . | Payor name Payor address; City; State; Zip Code | Amount (\$) |
| | Reason for credit | · |
| Date | Payor name Payor address: City; State; Zip Code | Amount (\$) |
| | Reason for credit | |
| Date _ | Payor name Payor address; City; State; Zip Code At a Reason for credit | Amount (\$) |
| Date | Payor name Payor address; City; State; Zip Code | Amount (\$) |
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| ' | TANDING LOANS | (512) 463-5800 1-800-3 |
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| | | SCHEDULE |
| The Instruct | ом Guide explains how to complete this form. | |
| 2 FILER NA | to Complete this form. | |
| - FILER NA | ME Wilfrod D | 1 Total pages Schedule L: |
| LENDER | Wilfred R. Aguilar | 3 4000 |
| INFORMATIO | 4 Name of lender | 3 ACCOUNT# (Etnics Commission filers) |
| 1 | | |
| | N/A | |
| | 5 Lender address; City; | |
| Cuan | | State: Zip Code |
| GUARANTOR INFORMATION | 6 Name of guarantor | · |
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| <u> </u> | 7 Guarantor address: | : P |
| not applicable | 7 Guarantor address: City; | · · · · · · · · · · · · · · · · · · · |
| LENDER | | State; Zip Code |
| INFORMATION | Name of lender | |
| | | |
| | Lender address: | |
| • | City: | State; |
| GUARANTOR | | Zip Code |
| INFORMATION | Name of guarantor | |
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| not applicable | Guarantee | |
| | Guarantor address: City; | State; |
| LENDER | Name of lender | Zip Code |
| INFORMATION | or lender | |
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| _ | Lender address; City; | |
| _ | | State; Zip Code |
| GUARANTOR INFORMATION | Name of guarantor | · - |
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| _ | | |
| not applicable | Guarantor address; City; | *************************************** |
| LENDER | | State; Zip Code |
| INFORMATION | Name of lender | |
| 1 | | |
| ſ | Lender address: | |
| | CIIV: | State; |
| UARANTOR | · | Zip Code |
| FORMATION . | Name of guarantor | |
| 1 | | |
| not applicable | Guarantor address; City | |
| | | State; 71-0 |
| | | Zip Code |
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P.O. Box 12070

| ASSETS VA | Al | 4000 OIV | | | SCHEDUL - | ITI |
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| he Instruction Guide | explains how to co | molete this form | | 1 Total | pages Schedule M: | |
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| FILER NAME | Wilfred R. | Aguilar | | 3 ACC | DUNT # (Ethics Commission file | (II) |
| Description of Asset | N/A | · · | <u> </u> | | · · · · · · · · · · · · · · · · · · · | |
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